

PART B - FEE(S) TRANSMITTAL

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20995 7590 07/16/2009

KNOBBE MARTENS OLSON & BEAR LLP
2040 MAIN STREET
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IRVINE, CA 92614

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(Depositor's name)
(Signature)
(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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10675.225 09/29/2003 Kameron W. Maxwell MITOS.002A 9871

TITLE OF INVENTION: NITROXIDE RADIOPROTECTOR FORMULATIONS AND METHODS OF USE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
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nonprovisional YES \$755 \$300 \$0 \$1055 10/16/2009

EXAMINER	ART UNIT	CLASS-SUBCLASS
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ROGERS, JAMES WILLIAM 1618 514-327000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.353).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
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1 Knobbe Martens
 2 Olson & Bear, LLP
 3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Mitos Pharmaceuticals, Inc.

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

Newport Beach, CA

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

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- ☒ Issue fee
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5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature _____
 Typed or printed name Carolyn A. Favorito

Date October 16, 2009

Registration No. 39,183

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